



**PROVIDER REPORT
FOR**

**DDS METRO REGION
OFFICE
465 Waverley Oak Road
Suite 120 Waltham, MA
02452**

March 21, 2016

Version

Provider Web Report

**Prepared by the Department of Developmental Services
OFFICE OF QUALITY ENHANCEMENT**

SUMMARY OF OVERALL FINDINGS

| | |
|-----------------|-------------------------|
| Provider | DDS METRO REGION OFFICE |
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|---------------------|----------------------|
| Review Dates | 2/9/2016 - 2/12/2016 |
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|---|-----------|
| Service Enhancement Meeting Date | 2/23/2016 |
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| Survey Team | Mark Boghoian Raymond Edi-Osagie Cheryl Hampton Leslie Hayes (TL) Lisa MacPhail Danielle Vautour |
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Survey scope and findings for Residential and Individual Home Supports

| Service Group Type | Sample Size | Licensure Scope | Licensure Level | Certification Scope | Certification Level |
|---|------------------------------|------------------------|---|----------------------------|----------------------------|
| Residential and Individual Home Supports | 8 location(s) 8 audit (s) | Full Review | 80 / 84 2 Year License 02/23/2016 - 02/23/2018 | | |
| Residential Services | 8 location(s) 8 audit (s) | | | Full Review | 14 / 14 Certified |

Survey scope and findings for Employment and Day Supports

| Service Group Type | Sample Size | Licensure Scope | Licensure Level | Certification Scope | Certification Level |
|------------------------------------|------------------------------|------------------------|---|----------------------------|----------------------------|
| Employment and Day Supports | 1 location(s) 3 audit (s) | Full Review | 47 / 48 2 Year License 02/23/2016 - 02/23/2018 | | |
| Employment Support Services | 1 location(s) 3 audit (s) | | | Full Review | 18 / 18 Certified |

Survey scope and findings for Planning and Quality Management

| Service Group Type | Sample Size | Scope | Licensure Level | Certification Scope | Certification Level |
|---------------------------------|--------------------|--------------|------------------------|----------------------------|----------------------------|
| Planning and Quality Management | N/A | N/A | N/A | Full Review | 6/6 Certified |

EXECUTIVE SUMMARY:

Metro Residential Services (MRS) is a state operated agency that provides residential and employment supports to individuals with intellectual and/or developmental challenges. It provides 24 hour residential services to 135 individuals in twenty-nine homes within the Metro Region. The newly acquired Metro Employment Services (MES) provides employment supports to sixteen individuals through its can and bottle redemption center and competitive job situations. The individuals served by MRS in both its residential and employment services present a wide-range of abilities and service needs that may require strong behavioral and/or medical supports. In addition to nurses and psychologists, occupational, physical and speech therapists are also actively involved in enriching the quality of people's lives. This is the agency's eleventh survey cycle which includes a Full Licensure and Certification Review of the 24-hour residential services provided at eight homes and three individuals supported through the newly acquired employment services.

Since the last survey conducted in 2014, MRS has undergone significant changes in key positions such as the executive director, several directors of residential supports, long-term residential supervisors, job developers, a vocational instructor and the director of employment services. Some have been replaced with new staff while other positions have been eliminated. It was therefore necessary for the agency to re-think how positions were used and in some cases re-allocate duties and responsibilities. The agency continues to focus on its 2014-2016 Strategic Plan, working towards or meeting the goals that were set forth including successfully incorporating MES into its agency structure, increasing people's satisfaction with services and improving people's home environments. Many of the agency's successes can be directly attributed to the well-developed goals and implementation strategies set forth within its Plan and the hard work of residential and employment staff throughout the organization.

MRS performed extremely well in meeting Licensing expectations. It systematically addressed areas needing improvement that were identified in the previous Residential Licensing survey and had corrected or made significant improvements in all but two indicators. Many of the MRS residential division improvements were in the areas of Health Care; and, effective oversight systems were evident. Medical and medication documentation was found to be accurate and consistent throughout people's records including Emergency Fact Sheets, Medication and Treatment Forms and Health Care Records. Staff were well trained on the unique needs of individuals and preventative health screenings and follow-up medical appointments were consistently occurring. Behavioral data was present in the homes and there was evidence that this data was used to inform the psychiatrist and team members in making medication and behavioral decisions. Homes visited were clean, neat and in good repair; and, maintenance staff were noted to be responsive and thorough. Grants were obtained for energy efficient home improvements and four HUD homes are currently undergoing extensive renovations so as to better adapt to and accommodate individuals' changing needs. In the past two years, the Human Rights Committee has been condensed from three to two and has continued to be effective and comprehensive in review of Human Rights issues.

As recently as the Summer of 2015, MES was Licensed and Certified as an independent agency called, The Waverly Redemption Center. It had and continues to have an effective business partnership with Work, Community, Independence (WCI) that manages the financial, marketing and administrative activities of the business that includes maintaining Department of Labor Certification; cash management, payroll and banking; and facility maintenance. MES had performed quite well during the previous survey. Shortly thereafter, the merge with MRS occurred and findings indicated that even within this period of time, improvements were made. It was noted that the program was responding to the employment needs of individuals. At MES, individuals' skills and aspirations vary greatly, from those just starting into the work world to those now facing the retirement decision. Additionally, many individuals exhibit behaviors that make employment decisions even more challenging. Regardless of individual situations, MES was tailoring jobs and job searches to each person and striving to find work situations to suit the

individual's circumstances. Staff maintained consistent contact with individuals and offered support as needed once jobs were attained. Despite the director vacancy, staff have performed exemplarily, making a huge cultural shift from sheltered employment to individually based supports geared to successful employment.

Within the agency's residential supports, Certification areas were well addressed and staff were offering choice and decision-making opportunities to those served. MRS continues to have a strong and active self-advocacy group, MRS Speaks Out. Another agency strength identified through survey was its emphasis on conducting satisfaction surveys with individuals and using the information obtained to improve services. As a result of individual input, tracks were installed in the ceilings of some homes to increase comfort and safety in lifting people from wheelchairs and rear loading vehicles were purchased. In response to a great number of people's dissatisfaction with the texture and appearance of a ground or pureed diet, extensive work went into creating techniques that were "doable" for staff and that presented an appetizing and flavorful meal. This practice is commendable. The agency also sought out and made use of satisfaction information from families, guardians and other stakeholders. Within employment services, as previously stated, staff worked extensively with individuals to determine job interests, skills and goals and used this information to facilitate successful job placements. There was also ongoing work on interpersonal skills on the job and support in responding to stressful situations that may occur.

Through the survey process, a few areas for further growth and improvement were identified. Environmentally, the water temperatures at some of the homes did not meet required parameters. Also, residentially, more attention is needed toward the timely submission of support strategies and ensuring individual funds do not exceed the required limits. For both residential and employment services, systems need to be more effective in ensuring that data collection and progress notes address the established objectives and support strategies. Although the agency met the residential indicators pertaining to community and relationships, the need for increasing individual access within their communities and forming relationships was identified as an area that could be strengthened. As there were several findings regarding financial accounts that exceeded social security guidelines, it is suggested that funds be utilized for increased exploration in these areas.

In summary, MRS was found to be consistently providing good quality services. Staff at all levels of the organization is congratulated for their dedication and their knowledge of persons' served. The agency met 95% of licensing indicators in the residential service grouping and 98% of licensing indicators in employment. In Certification, 100% of the indicators were met for both residential and employment supports. Therefore, the agency will receive 2 Two-Year Licenses and will complete its own follow-up which is due within 60 days of the Service Enhancement Meeting.

LICENSURE FINDINGS

| | Met / Rated | Not Met / Rated | % Met |
|---|----------------|-----------------------|------------|
| Organizational | 10/10 | 0/10 | |
| Residential and Individual Home Supports | 70/74 | 4/74 | |
| Residential Services | | | |
| Critical Indicators | 8/8 | 0/8 | |
| Total | 80/84 | 4/84 | 95% |
| 2 Year License | | | |
| # indicators for 60 Day Follow-up | | 4 | |

| | Met / Rated | Not Met / Rated | % Met |
|--|----------------|-----------------------|------------|
| Organizational | 10/10 | 0/10 | |
| Employment and Day Supports | 37/38 | 1/38 | |
| Employment Support Services | | | |
| Critical Indicators | 6/6 | 0/6 | |
| Total | 47/48 | 1/48 | 98% |
| 2 Year License | | | |
| # indicators for 60 Day Follow-up | | 1 | |

Residential Commendations on Standards Met:

| Indicator # | Indicator | Commendations |
|----------------|---|---|
| L77 | The agency assures that staff are familiar with and trained to support the unique needs of individuals. | A review of the documentation demonstrates extremely effective systems for ensuring staff are trained in the individual's unique medical needs. It was noted that systems were effective in ensuring that the individuals served received routine preventative screenings as well as follow-up medical appointments. Medical documentation was clearly and consistently documented. |

Residential Areas Needing Improvement on Standards not met/Follow-up to occur:

| Indicator # | Indicator | Area Needing Improvement |
|----------------|--|--|
| L15 | Hot water temperature tests between 110 and 130 degrees. | In two of the eight homes surveyed, water temperatures were not within the required parameters. The agency needs to ensure that the water temperatures remain between 110 and 120 degrees. |

| | | |
|-----|---|--|
| L69 | Individual expenditures are documented and tracked. | In two of the eight individuals surveyed, the amount of the individuals' accounts exceeded the required Social Security limits. The agency needs to ensure that individual accounts are monitored and do not exceed Social Security guidelines. |
| L87 | Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP. | In two of the six individuals surveyed, the support strategies were not submitted within the required timeline. The agency needs to ensure that support strategies are submitted to the service coordinator within the required timelines. |
| L88 | Services and support strategies identified and agreed upon in the ISP for which the provider has designated responsibility are being implemented. | In five of the eight individuals surveyed, the data collected and/or progress noted did not address the established objectives and support strategies. The agency needs to ensure that data collection and progress notes address the established objectives and support strategies. |

Employment/Day Areas Needing Improvement on Standards not met/Follow-up to occur:

| Indicator # | Indicator | Area Needing Improvement |
|-------------|---|---|
| L88 | Services and support strategies identified and agreed upon in the ISP for which the provider has designated responsibility are being implemented. | In one of the three individuals surveyed, the data collected and/or progress notes did not address the established objectives and support strategies. The agency needs to ensure that data collection and progress notes address the established objectives and support strategies. |

CERTIFICATION FINDINGS

| | Met / Rated | Not Met / Rated | | Met / Rated | Not Met / Rated |
|--|----------------|-----------------------|--|----------------|-----------------------|
| Certification - Planning and Quality Management | 6/6 | 0/6 | Certification - Planning and Quality Management | 6/6 | 0/6 |
| Residential and Individual Home Supports | | | Employment and Day Supports | | |
| Residential Services | 14/14 | 0/14 | Employment Support Services | 18/18 | 0/18 |

Planning and Quality Management Commendations on Standards Met:

| Indicator # | Indicator | Commendations |
|-------------|---|---|
| C3 | The provider actively solicits and utilizes input from the individuals and families regarding satisfaction with services. | The homes were in good repair and maintenance was noted to be responsive when issues occurred. In addition, maintenance was creative in seeking out grants, etc. in order to upgrade homes and make them more energy efficient. The agency responded to the individuals' dissatisfaction with the texture and appearance of ground and pureed diets by doing extensive work in techniques that are "do-able" for staff and that presented appetizing and flavorful meals. |

Employment Support Services Commendations on Standards Met:

| Indicator # | Indicator | Commendations |
|-------------|--|--|
| C22 | Staff have effective methods to assist individuals to explore their job interests. | Employment has extensive systems in place to assist individuals in exploring their job interests. In addition, the agency assists individuals to explore employment possibilities based on their interests. The extent to which individuals are supported to understand and take part in choosing competitive employment options is commendable. |

MASTER SCORE SHEET LICENSURE


Organizational: DDS METRO REGION OFFICE

| Indicator # | Indicator | Met/Rated | Rating (Met, Not Met, Not Rated) |
|-------------|-------------------------|-----------|----------------------------------|
| Ⓟ L2 | Abuse/neglect reporting | 12/12 | Met |
| L3 | Immediate Action | 9/9 | Met |
| L4 | Action taken | 12/12 | Met |
| L48 | HRC | 2/2 | Met |
| L65 | Restraint report submit | 10/12 | Met(83.33 %) |
| L66 | HRC restraint review | 10/10 | Met |
| L74 | Screen employees | 3/3 | Met |
| L75 | Qualified staff | 3/3 | Met |
| L76 | Track trainings | 20/20 | Met |
| L83 | HR training | 20/20 | Met |

Residential and Individual Home Supports:

| Ind. # | Ind. | Loc. or Indiv. | Res. Sup. | Ind. Home Sup. | Place. | Resp. | ABI- MFP Res. Sup. | ABI- MFP Place. | Total Met/Rated | Rating |
|--------|---------------------------|----------------------|--------------|----------------------|--------|-------|-----------------------------|-----------------------|--------------------|----------------------|
| L1 | Abuse/neglect training | I | 8/8 | | | | | | 8/8 | Met |
| L5 | Safety Plan | L | 8/8 | | | | | | 8/8 | Met |
| Ⓟ L6 | Evacuation | L | 8/8 | | | | | | 8/8 | Met |
| L7 | Fire Drills | L | 8/8 | | | | | | 8/8 | Met |
| L8 | Emergency Fact Sheets | I | 7/8 | | | | | | 7/8 | Met (87.50 %) |
| L9 | Safe use of equipment | L | 8/8 | | | | | | 8/8 | Met |
| L10 | Reduce risk interventions | I | 1/1 | | | | | | 1/1 | Met |
| Ⓟ L11 | Required inspections | L | 8/8 | | | | | | 8/8 | Met |
| Ⓟ L12 | Smoke detectors | L | 8/8 | | | | | | 8/8 | Met |
| Ⓟ L13 | Clean location | L | 8/8 | | | | | | 8/8 | Met |
| L14 | Site in good repair | L | 5/5 | | | | | | 5/5 | Met |
| L15 | Hot water | L | 6/8 | | | | | | 6/8 | Not Met (75.00 %) |
| L16 | Accessibility | L | 8/8 | | | | | | 8/8 | Met |
| L17 | Egress at grade | L | 8/8 | | | | | | 8/8 | Met |
| L19 | Bedroom location | L | 8/8 | | | | | | 8/8 | Met |
| L20 | Exit doors | L | 8/8 | | | | | | 8/8 | Met |
| L21 | Safe electrical equipment | L | 8/8 | | | | | | 8/8 | Met |
| L22 | Clean appliances | L | 7/8 | | | | | | 7/8 | Met (87.50 %) |
| L23 | Egress door locks | L | 6/6 | | | | | | 6/6 | Met |
| L24 | Locked door access | L | 3/3 | | | | | | 3/3 | Met |
| L25 | Dangerous substances | L | 8/8 | | | | | | 8/8 | Met |
| L26 | Walkway safety | L | 8/8 | | | | | | 8/8 | Met |


| | | | | | | | | | | |
|-------|--------------------------|---|-----|--|--|--|--|--|-----|-----|
| L28 | Flammables | L | 8/8 | | | | | | 8/8 | Met |
| L29 | Rubbish/combustibles | L | 8/8 | | | | | | 8/8 | Met |
| L30 | Protective railings | L | 5/5 | | | | | | 5/5 | Met |
| L31 | Communication method | I | 8/8 | | | | | | 8/8 | Met |
| L32 | Verbal & written | I | 8/8 | | | | | | 8/8 | Met |
| L33 | Physical exam | I | 8/8 | | | | | | 8/8 | Met |
| L34 | Dental exam | I | 8/8 | | | | | | 8/8 | Met |
| L35 | Preventive screenings | I | 8/8 | | | | | | 8/8 | Met |
| L36 | Recommended tests | I | 8/8 | | | | | | 8/8 | Met |
| L37 | Prompt treatment | I | 7/7 | | | | | | 7/7 | Met |
| Ⓟ L38 | Physician's orders | I | 6/6 | | | | | | 6/6 | Met |
| L39 | Dietary requirements | I | 7/7 | | | | | | 7/7 | Met |
| L40 | Nutritional food | L | 8/8 | | | | | | 8/8 | Met |
| L41 | Healthy diet | L | 8/8 | | | | | | 8/8 | Met |
| L42 | Physical activity | L | 8/8 | | | | | | 8/8 | Met |
| L43 | Health Care Record | I | 8/8 | | | | | | 8/8 | Met |
| L44 | MAP registration | L | 8/8 | | | | | | 8/8 | Met |
| L45 | Medication storage | L | 8/8 | | | | | | 8/8 | Met |
| Ⓟ L46 | Med. Administration | I | 8/8 | | | | | | 8/8 | Met |
| L47 | Self medication | I | 6/6 | | | | | | 6/6 | Met |
| L49 | Informed of human rights | I | 8/8 | | | | | | 8/8 | Met |
| L50 | Respectful Comm. | L | 8/8 | | | | | | 8/8 | Met |
| L51 | Possessions | I | 8/8 | | | | | | 8/8 | Met |
| L52 | Phone calls | I | 8/8 | | | | | | 8/8 | Met |
| L53 | Visitation | I | 8/8 | | | | | | 8/8 | Met |
| L54 | Privacy | L | 8/8 | | | | | | 8/8 | Met |
| L55 | Informed consent | I | 1/1 | | | | | | 1/1 | Met |
| L56 | Restrictive practices | I | 1/1 | | | | | | 1/1 | Met |
| L57 | Written behavior plans | I | 1/1 | | | | | | 1/1 | Met |
| L58 | Behavior plan component | I | 1/1 | | | | | | 1/1 | Met |

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|--|---------------------------|---|-----|--|--|--|--|--|-------|-------------------|
| L59 | Behavior plan review | I | 1/1 | | | | | | 1/1 | Met |
| L60 | Data maintenance | I | 1/1 | | | | | | 1/1 | Met |
| L61 | Health protection in ISP | I | 8/8 | | | | | | 8/8 | Met |
| L62 | Health protection review | I | 7/8 | | | | | | 7/8 | Met (87.50 %) |
| L63 | Med. treatment plan form | I | 6/7 | | | | | | 6/7 | Met (85.71 %) |
| L64 | Med. treatment plan rev. | I | 7/7 | | | | | | 7/7 | Met |
| L67 | Money mgmt. plan | I | 8/8 | | | | | | 8/8 | Met |
| L68 | Funds expenditure | I | 8/8 | | | | | | 8/8 | Met |
| L69 | Expenditure tracking | I | 6/8 | | | | | | 6/8 | Not Met (75.00 %) |
| L70 | Charges for care calc. | I | 8/8 | | | | | | 8/8 | Met |
| L71 | Charges for care appeal | I | 8/8 | | | | | | 8/8 | Met |
| L77 | Unique needs training | I | 8/8 | | | | | | 8/8 | Met |
| L78 | Restrictive Int. Training | L | 2/2 | | | | | | 2/2 | Met |
| L79 | Restraint training | L | 1/1 | | | | | | 1/1 | Met |
| L80 | Symptoms of illness | L | 8/8 | | | | | | 8/8 | Met |
| L81 | Medical emergency | L | 8/8 | | | | | | 8/8 | Met |
|  L82 | Medication admin. | L | 8/8 | | | | | | 8/8 | Met |
| L84 | Health protect. Training | I | 8/8 | | | | | | 8/8 | Met |
| L85 | Supervision | L | 8/8 | | | | | | 8/8 | Met |
| L86 | Required assessments | I | 7/7 | | | | | | 7/7 | Met |
| L87 | Support strategies | I | 4/6 | | | | | | 4/6 | Not Met (66.67 %) |
| L88 | Strategies implemented | I | 3/8 | | | | | | 3/8 | Not Met (37.50 %) |
| #Std. | | | | | | | | | 70/74 | |

| | | | | | | | | | | |
|---------------------------|--|--|--|--|--|--|--|--|---------------|--|
| Met/# 74 Indicator | | | | | | | | | | |
| Total Score | | | | | | | | | 80/84 | |
| | | | | | | | | | 95.24% | |

Employment and Day Supports:

| Ind. # | Ind. | Loc. or Individ. | Emp. Sup. | Cent. Based Work | Com. Based Day | Total Met / Rated | Rating |
|---------------|---------------------------|-------------------------|------------------|-------------------------|-----------------------|--------------------------|---------------|
| L1 | Abuse/neglect training | I | 3/3 | | | 3/3 | Met |
| L5 | Safety Plan | L | 1/1 | | | 1/1 | Met |
| Ⓟ L6 | Evacuation | L | 1/1 | | | 1/1 | Met |
| L7 | Fire Drills | L | 1/1 | | | 1/1 | Met |
| L8 | Emergency Fact Sheets | I | 3/3 | | | 3/3 | Met |
| L9 | Safe use of equipment | L | 1/1 | | | 1/1 | Met |
| Ⓟ L11 | Required inspections | L | 1/1 | | | 1/1 | Met |
| Ⓟ L12 | Smoke detectors | L | 1/1 | | | 1/1 | Met |
| Ⓟ L13 | Clean location | L | 1/1 | | | 1/1 | Met |
| L14 | Site in good repair | L | 1/1 | | | 1/1 | Met |
| L15 | Hot water | L | 1/1 | | | 1/1 | Met |
| L16 | Accessibility | L | 1/1 | | | 1/1 | Met |
| L17 | Egress at grade | L | 1/1 | | | 1/1 | Met |
| L18 | Above grade egress | L | 1/1 | | | 1/1 | Met |
| L20 | Exit doors | L | 1/1 | | | 1/1 | Met |
| L21 | Safe electrical equipment | L | 1/1 | | | 1/1 | Met |
| L22 | Clean appliances | L | 1/1 | | | 1/1 | Met |
| L25 | Dangerous substances | L | 1/1 | | | 1/1 | Met |
| L26 | Walkway safety | L | 1/1 | | | 1/1 | Met |
| L29 | Rubbish/combustibles | L | 1/1 | | | 1/1 | Met |
| L30 | Protective railings | L | 1/1 | | | 1/1 | Met |

| | | | | | | | |
|---|--------------------------|---|-----|--|--|--------|-------------------|
| L31 | Communication method | I | 3/3 | | | 3/3 | Met |
| L32 | Verbal & written | I | 3/3 | | | 3/3 | Met |
|  L38 | Physician's orders | I | 1/1 | | | 1/1 | Met |
| L49 | Informed of human rights | I | 3/3 | | | 3/3 | Met |
| L50 | Respectful Comm. | L | 1/1 | | | 1/1 | Met |
| L51 | Possessions | I | 3/3 | | | 3/3 | Met |
| L52 | Phone calls | I | 3/3 | | | 3/3 | Met |
| L54 | Privacy | L | 1/1 | | | 1/1 | Met |
| L72 | DOL requirements | I | 3/3 | | | 3/3 | Met |
| L73 | DOL certificate | L | 1/1 | | | 1/1 | Met |
| L77 | Unique needs training | I | 3/3 | | | 3/3 | Met |
| L80 | Symptoms of illness | L | 1/1 | | | 1/1 | Met |
| L81 | Medical emergency | L | 1/1 | | | 1/1 | Met |
| L85 | Supervision | L | 1/1 | | | 1/1 | Met |
| L86 | Required assessments | I | 1/1 | | | 1/1 | Met |
| L87 | Support strategies | I | 2/2 | | | 2/2 | Met |
| L88 | Strategies implemented | I | 2/3 | | | 2/3 | Not Met (66.67 %) |
| #Std. Met/# 38 Indicator | | | | | | 37/38 | |
| Total Score | | | | | | 47/48 | |
| | | | | | | 97.92% | |

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

| Indicator # | Indicator | Met/Rated | Rating |
|-------------|----------------------------------|-----------|--------|
| C1 | Provider data collection | 1/1 | Met |
| C2 | Data analysis | 1/1 | Met |
| C3 | Service satisfaction | 1/1 | Met |
| C4 | Utilizes input from stakeholders | 1/1 | Met |
| C5 | Measure progress | 1/1 | Met |

| | | | |
|----|----------------------------|-----|-----|
| C6 | Future directions planning | 1/1 | Met |
|----|----------------------------|-----|-----|

Employment Support Services Reviewed By -DDS

| Indicator # | Indicator | Met/Rated | Rating |
|-------------|--------------------------------|-----------|--------|
| C7 | Feedback on staff performance | 3/3 | Met |
| C8 | Family/guardian communication | 3/3 | Met |
| C22 | Explore job interests | 3/3 | Met |
| C23 | Assess skills & training needs | 3/3 | Met |
| C24 | Job goals & support needs plan | 3/3 | Met |
| C25 | Skill development | 3/3 | Met |
| C26 | Benefits analysis | 2/2 | Met |
| C27 | Job benefit education | 3/3 | Met |
| C28 | Relationships w/businesses | 1/1 | Met |
| C29 | Support to obtain employment | 3/3 | Met |
| C30 | Work in integrated settings | 2/2 | Met |
| C31 | Job accommodations | 3/3 | Met |
| C32 | At least minimum wages earned | 3/3 | Met |
| C33 | Employee benefits explained | 3/3 | Met |
| C34 | Support to promote success | 3/3 | Met |
| C35 | Feedback on job performance | 3/3 | Met |
| C36 | Supports to enhance retention | 3/3 | Met |
| C37 | Interpersonal skills for work | 3/3 | Met |

Residential Services Reviewed By -DDS

| Indicator # | Indicator | Met/Rated | Rating |
|-------------|---------------------------------|-----------|---------------|
| C7 | Feedback on staff performance | 7/8 | Met (87.50 %) |
| C8 | Family/guardian communication | 8/8 | Met |
| C9 | Personal relationships | 7/8 | Met (87.50 %) |
| C10 | Social skill development | 8/8 | Met |
| C11 | Get together w/family & friends | 8/8 | Met |
| C12 | Intimacy | 5/6 | Met (83.33 %) |
| C13 | Skills to maximize independence | 8/8 | Met |
| C14 | Choices in routines & schedules | 8/8 | Met |

| | | | |
|-----|------------------------------|-----|----------------------|
| C15 | Personalize living space | 8/8 | Met |
| C16 | Explore interests | 7/8 | Met (87.50 %) |
| C17 | Community activities | 8/8 | Met |
| C18 | Purchase personal belongings | 8/8 | Met |
| C19 | Knowledgeable decisions | 8/8 | Met |
| C20 | Emergency back-up plans | 8/8 | Met |